

## HOME AND COMMUNITY-BASED CARE WAIVERS: CONSUMER-DIRECTED PERSONAL ATTENDANT SERVICES WAIVER

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Personal care is provided under this waiver to elderly and disabled individuals who are eligible for nursing facility placement under this Medicaid Program. To receive service under the Consumer-Directed Personal Attendant Services Waiver, individuals must meet the waiver's target population. The target population includes those individuals whom:

- (1) meet the nursing facility level of care criteria (i.e., are functionally dependent and require medical and nursing supervision of care),
- (2) are determined to be at risk of nursing facility placement and for whom community-based care service under the waiver is the critical service that enables the individual to remain at home rather than being placed in a nursing facility,
- (3) have no cognitive impairments nor have an appointed guardian if they want to direct their own care but may have someone else direct their care,
- (4) are able to manage their own affairs without help from another individual, and
- (5) are able to hire and train their own personal attendant and supervise the attendants' performance.

The community-based care service under the waiver cannot be offered to individuals unless it can reasonably be expected that the individual would, without this service, enter a nursing facility. Provision of home and community-based care must be determined by either a Pre-admission Screening Team or DMAS to be a medically appropriate, individually cost-effective alternative to institutional care. The waiver year runs concurrently with the state fiscal year.

Effective Date	July 1, 1997
Covered Services	Reimbursement for services of Personal Attendants who assist with the recipient's activities of daily living such as bathing, dressing, transferring, ambulation and meal preparation.
Excluded Services	Skilled services requiring professional skills or invasive therapies.
Pre-assessment/ Development of Plan of Care	A Pre-admission Screening Team completes the pre-assessment. WVMI or DMAS must authorize services. An agency/organization contracted to provide service coordination services will develop the plan of care with the recipient. WVMI began conducting pre-authorizations for this Waiver in April 2001.
Providers	<p>Agencies, individuals, and organizations that are enrolled with DMAS to be a provider of service coordination. Providers of service coordination may be personal care/home care agencies, area agencies on aging, and centers for independent living. The fiscal agent is DMAS.</p> <p><u>Personal Attendants must:</u> be able to perform services as specified in the plan of care; possess basic math, reading and writing skills; possess a valid Social Security number; submit to a criminal history record check and/or Child Protective Services (CPS) check; be willing to attend training at the consumer's request; and not be the spouse of the individual, or parent/step parent of a recipient who is a minor (under the age of 18).</p>

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Billing	<p>Service Facilitators bill using procedure codes to indicate the type of service provided. Reimbursement is made for the types of visits and training provided as well as for criminal record and/or CPS checks that the service facilitator submits on behalf of the recipient.</p> <p>Personal attendants who provide personal attendant services submit bi-weekly timesheets to the Fiscal Agent payroll processing.</p>			
Current Rates	<p>Personal Attendants: Northern Virginia: \$10.10/hour Rest of State: \$7.80/hour</p> <p>Service Facilitator Provider Agencies:  <u>Initial Comprehensive Home Visit:</u> \$160.00/visit (limit: one per recipient upon entry into the waiver)  <u>Routine Home Visit:</u> \$50.00/visit (not to exceed once/month; can occur once/two-three months, upon discretion of the Service Facilitator and the recipient)  <u>Reassessment Visit:</u> \$80.00/visit (limit: one every six months)  <u>Recipient Management Training:</u> \$160.00/training (limit: once per recipient upon entry into the waiver)  <u>Management Training:</u> \$20.00/hour (up to 4 hours every 6 months per recipient)  <u>Criminal Record and CPS (for attendants caring for minors) Checks:</u> \$15.00/check (not to exceed six checks every six months per recipient)</p>			
Recipient Data	Waiver Year	Number of Recipients	Payments	AVG Per Recipient
	1998	12	\$13,031	\$1,086
	1999	65	320,380	4,929
	2000	103	477,461	4,636
	2001	151	609,765	4,038
	2002	199	2,088,299	10,494
	2003	162	2,690,983	17,042

Source: HCFA-372 Report series, "Annual report on Home and Community Based Waivers"

Note: This report is updated annually.

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